



CAMERON COUNTY CIVIL SERVICE COMMISSION

EMPLOYEE APPEAL FORM TO DEPARTMENT HEAD

This form and required documentation must be filed with the Department Head within seven (7) calendar days of receipt of the Notification of Disciplinary Action

Acton being appealed:

____ Suspension of ____ days _____ Demotion ____ Discharge

Date of receipt of Notification of Disciplinary Action _____

____ a. Attached are copies of documents I will be presenting at the appeal.

Employee's Signature

Date

Print Name

Department

Received:

For the Department

Date

Cc: Director of Human Resources/Civil Service Director
 Supervisor